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PTO/SB/021 (08-00)

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<b>TRANSMITTAL FORM</b>  (to be used for all correspondence after initial filing)		Application Number	09/853,568
		Filing Date	August 3, 2001
		First Named Inventor	Catherine Shoemaker
		Group Art Unit	3722
		Examiner Name	Monica Smith Carter
Total Number of Pages in This Submission	4	Attorney Docket Number	1960-00100

### ENCLOSURES (check all that apply)

- |  |   |   |
|--|---|---|
| <input checked="" type="checkbox"/> Fee Transmittal Form<br><input type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Reply<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input checked="" type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts/<br>Incomplete Application<br><input type="checkbox"/> Response to Missing Parts<br>under 37 CFR 1.52 or 1.53 | <input type="checkbox"/> Assignment<br>(for an application)<br><input type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a<br>Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation<br>Change of Correspondence Address<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) | <input type="checkbox"/> After Allowance Communication<br>to Group<br><input type="checkbox"/> Appeal Communication to Board<br>of Appeals and Interferences<br><input checked="" type="checkbox"/> Appeal Communication to Group<br>(Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Other Enclosure(s) (please<br>identify below):<br><br>1. Postcard |
|--|---|---|

Remarks

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### SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm Or Individual Name	Jonathan Pierce Conley, Rose & Taxon, P.C., 600 Travis, Suite 7100, Houston, Texas 77002
Signature	
Date	November 26, 2002

### CERTIFICATE OF MAILING

I hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: November 26, 2002.

Typed or Printed Name	Linda Baker	Signature		Date	November 26, 2002
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# **FILE TRANSMITTAL** **For FY 2002**

Patent fees are subject to annual revision.

**TOTAL AMOUNT OF PAYMENT** \$ 360.00

## **Complete if Known**

Application Number 09/853,568  
Filing Date August 3, 2001  
First Named Inventor Catherine Shoemaker  
Examiner Name Monica Smith Carter  
Group Art Unit 3722  
Attorney Docket No. 1960-00100

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## **METHOD OF PAYMENT**

1. ☒ The Commissioner is hereby authorized to charge indicated fees and credit any overpayment to:  
Deposit Account Number: 03-2769  
Deposit Account Name: Conley, Rose & Tayon, P.C.  
☒ Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17  
☐ Applicant claims small entity status. See 37 CFR 1.27

2. ☐ **Payment Enclosed:**  
☐ Check ☐ Credit Card ☐ Money Order ☐ Other

## **FEE CALCULATION**

### **1. BASIC FILING FEE**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
101 740	201 370	Utility filing fee	\$
106 330	206 165	Design filing fee	\$
107 510	207 255	Plant filing fee	\$
108 740	208 370	Reissue filing fee	\$
114 160	214 80	Provisional filing fee	\$

**SUBTOTAL (1) \$ 0.00**

### **2. EXTRA CLAIM FEES**

Total Claims	Extra Claims	Fee from below	Fee Paid
19	-20** = 0 x	9.00	= \$0.00
Independent Claims	5	3** = 2 x	42.00 = \$84.00
Multiple Dependent			280.00 = \$00.00

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description
103 18	203 9	Claims in excess of 20
102 84	202 42	Independent Claims in excess of 3
104 280	204 140	Multiple dependent claim, if not paid
109 84	209 42	** Reissue independent claims over original patent
110 18	210 9	** Reissue claims in excess of 20 and over original patent

**SUBTOTAL (2) \$**

\*\* or number previously paid, if greater; For Reissues, see above

## **FEE CALCULATION (continued)**

### **3. ADDITIONAL FEES**

Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid
105 130	205 65	Surcharge - late filing fee or oath	\$
127 50	227 25	Surcharge - late provisional filing fee or cover sheet	\$
139 130	139 130	Non-English specification	\$
147 2,520	147 2,520	For filing a request for <i>ex parte</i> reexamination	\$
112 920*	112 920*	Requesting publication of SIR prior to Examiner action	\$
113 1,840*	113 1,840*	Requesting publication of SIR after Examiner action	\$
115 110	215 55	Extension for reply within first month	\$
116 400	216 200	Extension for reply within second month	\$200.00
117 920	217 460	Extension for reply within third month	\$
118 1,440	218 720	Extension for reply within fourth month	\$
128 1,960	228 980	Extension for reply within fifth month	\$
119 320	219 160	Notice of Appeal	\$160.00
120 320	220 160	Filing a brief in support of an appeal	\$
121 280	221 140	Request for oral hearing	\$
138 1,510	138 1,510	Petition to institute a public use proceeding	\$
140 110	240 55	Petition to revive - unavoidable	\$
141 1,280	241 640	Petition to revive - unintentional	\$
142 1,280	242 640	Utility issue fee (or reissue)	\$
143 460	243 230	Design issue fee	\$
144 620	244 310	Plant issue fee	\$
122 130	122 130	Petitions to the Commissioner	\$
123 50	123 50	Petitions related to provisional applications	\$
126 180	126 180	Submission of Information Disclosure Stmt	\$
581 40	581 40	Recording each patent assignment per property (times number of properties)	\$
146 740	246 370	Filing a submission after final rejection (37 CFR § 1.129(a))	\$
149 740	249 370	For each additional invention to be examined (37 CFR § 1.129(b))	\$
179 740	279 370	Request for Continued Examination (RCE)	\$
169 900	169 900	Request for expedited examination of a design application	\$
Other fee (specify)			\$

\*Reduced by Basic Filing Fee Paid

**SUBTOTAL (3) \$360.00**

## **SUBMITTED BY**

Name (Print/Type)	Jonathan Pierce	Registration No. (Attorney/Agent)	42,073	Telephone	(713) 238-8000
Signature		Date	November 26, 2002		

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